

NCF MEMBERSHIP UPDATE FORM

PLEASE PRINT

(ALL CHILDREN/YOUTH/ADULTS WHO ARE MEMBERS WILL NEED INDIVIDUAL FORM)

Please circle one: CHILD (ages 5-11) YOUTH (ages 12-17) ADULT (age 18+)

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

EMAIL: _____

HOME: _____ CELL: _____

EMPLOYED BY: _____ WORK #: _____

CHECK ONE: _____ MARRIED _____ SINGLE _____ DIVORCED

SPOUSE NAME: _____ IS SPOUSE A MEMBER? _____

CHILDREN NAMES AND DATE OF BIRTH (IF MEMBERS):

CHILD NAME: _____ DOB: _____ CHILD NAME: _____ DOB: _____

CHILD NAME: _____ DOB: _____ CHILD NAME: _____ DOB: _____

CHILD NAME: _____ DOB: _____ CHILD NAME: _____ DOB: _____

IF CHILD/YOUTH PLEASE LIST PARENTS NAME:

MOTHER _____ FATHER _____

(Please return completed form TODAY to any Church Usher or Office Staff)